

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 10/19/2011

FORM APPROVED

OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155348		X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING		X3) DATE SURVEY COMPLETED 09/27/2011	
NAME OF PROVIDER OR SUPPLIER PARKVIEW CARE CENTER				STREET ADDRESS, CITY, STATE, ZIP CODE 2819 NORTH ST JOSEPH AVENUE EVANSVILLE, IN47720			
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F0000	<p>This visit was for the Investigation of Complaint IN00097455. This visit resulted in a Partially Extended Survey-Substandard Quality of Care.</p> <p>Complaint IN00097455 Substantiated, Federal/State deficiencies are cited at F221 and F323.</p> <p>Survey date: September 27, 2011</p> <p>Facility number: 000239 Provider number: 155348 AIM number: 100290150</p> <p>Survey team: Anne Marie Crays RN</p> <p>Census bed type: SNF/NF: 82 Total: 82</p> <p>Census payor type: Medicare: 10 Medicaid: 53 Other: 19 Total: 82</p> <p>Sample: 3 Supplemental sample: 2</p> <p>These deficiencies also reflect state findings cited in accordance with 410 IAC</p>			F0000	<p>Please accept this plan of correction as my credible allegation of compliance. This plan of correction is submitted under federal and state regulations and statutes applicable to long term care providers. This plan of correction does not constitute an admission of liability on the part of the facility, and such liability is hereby specifically denied. The submission of this plan does not constitute agreement by the facility that the surveyors findings or conclusions are accurate, constitute deficiency, or that the scope and severity regarding any of the deficiencies cited are correctly applied.</p>		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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	16.2. Quality review completed 10/3/11 Cathy Emswiller RN						
F0221 SS=F	The resident has the right to be free from any physical restraints imposed for purposes of discipline or convenience, and not required to treat the resident's medical symptoms. Based on observation, interview, and record review, the facility failed to ensure side rail assessments were complete and accurate in assessing the potential use of side rails; failed to assess for safety issues with the use of siderails; and failed to			F0221	1.) Affected by alleged practice:Residents, A,B,C,D, & E now have accurate siderail assessments completed by Nursing Administration which includes assessment for safety. Any changes were communicated		10/21/2011

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	<p>communicate the use of side rails to all staff, in 2 of 2 units reviewed for side rail use and for 3 of 3 residents reviewed for side rail use in a sample of 3, and 2 of 2 residents reviewed in the supplemental sample of 2. This deficient practice had the potential to affect 82 of 82 residents with siderails attached to their beds. Residents A, B, C, D, and E.</p> <p>Findings include:</p> <p>1. On 9/27/11 at 8:25 A.M., during the initial tour of the Dogwood Unit, Unit Manager # 2 indicated that 6 out of 48 residents who resided on her unit were up ad lib, and did not use siderails. 42 of 48 residents used side rails. The 6 residents who did not utilize siderails continued to have the siderails bolted to the bed, but were kept in the down position. Unit Manager # 2 indicated that all of the side rails were the same and that they were considered 1/2 rails. Unit Manager # 2 indicated all of the side rails on her unit were not considered restraints, and that all were used for bed mobility.</p> <p>On 9/27/11 at 8:40 A.M., during the initial tour of the Holly Unit, LPN # 2 indicated that 2 of 34 residents who resided on her unit did not use siderails. 32 of 34 residents used side rails. LPN # 2 indicated all of the rails were 1/2 rails and</p>				<p>to the staff through updated careplans and care guides on 9/28/11 by Nursing Administration. Unit manager #1 and #2 as well as LPN#2 have been educated by the DON on the appropriate protocol for siderail usage on 9/28/11 including obtaining physicians orders as well as updating the careplan and care guides to reflect accurate information. 2.)Potential to be affected:Residents residing in the facility have the potential to be affected therefore a 100% audit will be completed by Nursing Administration by 10/21/11 to ensure siderail assessments are accurate and include assessment for safety as well. Any changes will be communicated to staff by being addressed on the careplan and care guides. 3.) Systemic changes:Re-education to Nursing Administration was conducted by the DON on 9/28/11. This education included the completion of accurate siderail assessments and safety related to siderails as well as appropriate place, and functioning of alarms. Education has been provided to the ICPT on 9/30/11 by the Executive Director to include the accuracy of careplans and care guides to reflect appropriate side rail interventions and safety alarm interventions. Education also included that a new siderail assessments are to be completed on admissions and readmissions,</p>		

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	<p>were used for bed mobility. The 2 residents who did not use siderails were observed to have siderails mounted to the bed, but in the down position. LPN # 2 indicated some residents utilized only a half side rail on one side of the bed; for example if the other side of the bed was against the wall.</p> <p>On 9/27/11 at 9:00 A.M., LPN # 2 provided the current CNA assignment sheets for all of the units. 17 of the 82 residents had mention of siderails being utilized.</p> <p>On 9/27/11 at 9:45 A.M., during interview with the Director of Nursing [DON], she indicated side rails should be removed from the bed if they are not being used. She indicated a facility audit was completed on 9/23/11, in which all resident beds were assessed for the distance between the side rails and mattress; and that side rail assessments and care plans were reviewed for appropriateness for use.</p> <p>On 9/27/11 at 11:25 A.M., during interview with Unit Manager # 1, she indicated residents who use side rails should have a physician's order.</p> <p>On 9/27/11 at 3:30 P.M., during interview with Unit Manager # 2, she indicated the</p>				<p>with quarterly, annual and significant change MDS. Siderail assessments will be completed by Nursing Administration and if indicated as a restraint therapy will be involved as well.4.) Method to monitor:Siderail assessments, careplans, and care guides will be audited for accuracy ongoing through the care planning process weekly as scheduled by the ICPT, as well as with any new physician's orders, at least Monday-Friday. Audit results will be reported to the PI Committee monthly for 12 months. PI Committee will determine need for further audits with threshold at 95%. Plan will be updated as indicated. 5.) Completion date October 21, 2011.</p>		

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	<p>use of siderails should be printed on the CNA assignment sheets, and the nurse should sign off on the TAR [treatment administration record].</p> <p>2. The closed clinical record of Resident A was reviewed on 9/27/11 at 9:05 A.M. Diagnoses included, but were not limited to, Dementia and Cerebral Vascular Accident [stroke].</p> <p>An Initial Data Collection Tool/Nursing Service form, dated 3/8/11, indicated, "...Cognitive Status, Alert, Short Term Memory Loss...Bed Mobility, Requires Assistance to Reposition Self...Transfers, 1-2 Person Assistance...Toileting Needs Assistance to Manipulate Clothing and Hygiene Needs...."</p> <p>A Side Rail Assessment, dated 3/8/11, indicated: "Why is the use of a side rail(s) being considered? Resident requested - For Safety, Other...Cognitive, Requested rails...Security, Fear of rolling out of bed. Will the side rail(s) assist the resident in: Turning side to side Yes, Moving up and down in bed, Yes...Fluctuations in consciousness No, Decline in cognitive status Yes diagnosis of dementia...Side rail(s) is/are recommended at this time due to: Resident request. Recommended Type, 1/2 partial rail Left upper, Right upper. Recommended Use, Side rail(s) are</p>						

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	<p>recommended at all times when resident is in bed...Resident will be reassessed on/in [left blank] or sooner if there is a significant change in condition. Physician order has been obtained...[left unchecked]. Plan of care updated [left unchecked]."</p> <p>A "Nursing Assessment of Fall," dated 3/27/11 at 4:15 A.M., indicated, "...Trying to go to B/R [bathroom] rolled lower extremities out of bed (low bed) onto the floor had chest and head on bed - holding on to siderails...."</p> <p>Nurse's Notes included the following notations:</p> <p>5/13/11 at 11:40 P.M.: "Resident noted by CNA to be laying on stomach in the floor of his room holding on to bed rail [with] Right arm [and] Neck resting on bed rail. Slight redness noted to [left] knee [and] front of neck...."</p> <p>A "Nursing Assessment of Fall," dated 5/13/11, indicated: "...In bed. Tried to get up...Resident noted on stomach holding the side rail [with] [right] hand and neck resting on side rail, the rest of his body was on the floor...Care Plan changes/instructions...[Left blank]...."</p> <p>A new side rail assessment following this</p>						

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	<p>fall was lacking in the clinical record.</p> <p>A Minimum Data Set [MDS] assessment, dated 7/12/11, indicated the resident scored a 12 out of 15 for cognitive status, with 15 indicating no mental impairment, and required extensive assistance of two+ staff for bed mobility and transfer.</p> <p>The Side Rail Assessment had an addendum, dated 7/15/11, which indicated, "1/2 SR [side rails] in use."</p> <p>Nurse's Notes, dated 9/23/11 at 4:10 A.M., indicated: "Called to resident room by CNA. Resident on floor with left arm and head positioned between side rail and bed, with chin resting on rail. Resident non-responsive, no pulse or heart rate noted...When this nurse arrived in resident room, bed was in low position, tabs alarm was in place but not sounding, 1/2 side rails up for bed mobility and positioning. EMS unable to revive resident."</p> <p>An additional Care Plan, initially dated 3/8/11 and updated with a goal date of 10/20/11, indicated a problem of "I need help completing my ADL's." The approaches included: "Provide one half siderails to assist me with my bed mobility."</p> <p>Physician orders for the side rails were</p>						

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	<p>lacking in the clinical record.</p> <p>Documentation was lacking on the Treatment Administration Record that the resident had half side rails in place.</p> <p>During interview with the Director of Nursing [DON] on 9/27/11 at 9:45 A.M., she indicated Resident A utilized his side rails to assist him in turning side to side.</p> <p>During interview with LPN # 1 on 9/27/11 at 10:45 A.M., she indicated she was the nurse working on 9/23/11. LPN # 1 she had walked past Resident A's bed at approximately 3:50 A.M., and he was resting comfortably. LPN # 1 indicated CNA # 1 had started her "bed check" at approximately 4:10 A.M., and found Resident A lying with his knees on the floor, and his left arm and face between the side rail and the mattress. LPN # 1 indicated the arm and face were not "wedged", but that the chin was more against the lower inner part of the side rail.</p> <p>During interview with CNA # 1 on 9/27/11 at 10:55 A.M., she indicated she was the CNA who found Resident A. She indicated she last saw the resident at approximately 2:25 A.M., and she repositioned him on his right side. CNA # 1 indicated when she went in the</p>						

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	<p>resident's room at approximately 4:10 A.M., she found the resident with most of his body on the floor, and his left arm on the bed against the rail. She indicated the resident's chin was resting against the bed rail.</p> <p>During interview with Unit Manager # 1 on 9/27/11 at 11:25 A.M., she indicated the resident's side rail assessment was incomplete, and he should have had a physician's order for the side rails. She indicated the side rails would be listed on the care plan as an intervention for bed mobility.</p> <p>3. On 9/27/11 at 8:25 A.M., during the initial tour, Unit Manager # 2 indicated Resident E was up ad lib, and did not utilize his side rails. Resident E was observed at that time lying in bed, with half side-rails up on both sides of the bed. Unit Manager # 2 indicated that the resident was alert and oriented, and if he wanted to pull them up, he could.</p> <p>The clinical record of Resident E was reviewed on 9/27/11 at 3:00 P.M. Diagnoses included, but were not limited to, Muscle Weakness.</p> <p>A Physician's order, initially dated on 2/2/11 and on the current September 2011 orders, indicated, "Half upper side rails</p>						

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	<p>for increased bed mobility."</p> <p>An "Evaluation for Use of Side Rails," dated 12/22/10 and updated 8/29/11, indicated, "Why is the use of a side rail(s) being considered? Resident requested - For [increased] bed mobility...Recommended Type: 1/2 partial rail Left upper lower Right upper lower, Recommended Use [left blank]...8/29/11 Uses 1/2 SR at night to aid turning side to side."</p> <p>The current CNA assignment sheet, reviewed on 9/27/11 at 11:00 A.M., did not indicate the use of the side rails.</p> <p>4. On 9/27/11 at 8:40 A.M., during the initial tour, LPN # 2 indicated Resident B utilized bed rails. Resident B was observed at that time lying in a low bed, with half side rails up on both sides of the bed.</p> <p>The clinical record of Resident B was reviewed on 9/27/11 at 12:05 P.M. Diagnoses included, but were not limited to, Dementia and Alzheimer's Disease.</p> <p>A Physician's order, initially dated 1/7/11 and on the current September 2011 orders, indicated, "Low bed placement," and "Half Upper Rails to assist with bed mobility."</p>						

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	<p>A Side Rail Assessment, initially dated 6/30/10, indicated, "Why is the use of a side rail(s) being considered? Resident requested: to assist with bed mobility...Recommendations Side rails(s) are recommended at this time due to: Resident request. Recommended Type: 1/2 partial rail Left upper Right upper. Recommended Use, Side rail(s) are recommended at all times when resident is in bed..." The assessment was updated on 9/30/10, 1/7/11, 3/26/11, 4/19/11, 7/11/11, and 9/16/11. The most recent notation, dated 9/16/11, indicated, "No changes, cont POC [plan of care]."</p> <p>A "Nursing Assessment of Fall," dated 6/14/11 at 6:15 P.M., indicated, "...Exact Location: Bedside by bed in resident's room...Possible Causative [sic] factors identified: Confusion...."</p> <p>A Minimum Data Set [MDS] assessment, dated 9/7/11, indicated the resident scored a 4 out of 15 for cognition, with 15 indicating no mental impairment, and required extensive assistance of two + staff for bed mobility.</p> <p>A Care Plan, initially dated 7/10/10 and updated with a target date of 12/15/11, indicated a problem of "[Resident B] is at risk for skin breakdown due to</p>						

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	<p>incontinence." The approaches included: "Provide one half siderails to assist with bed mobility."</p> <p>During interview with the DON on 9/27/11 at 3:30 P.M., she indicated that residents were in low beds due to fall risks, and that the side rails were to assist the residents with bed mobility.</p> <p>During review of the CNA assignment sheet, on 9/27/11 at 11:00 A.M., documentation of the use of side rails was lacking.</p> <p>5. On 9/27/11 at 8:40 A.M., during the initial tour, LPN # 2 indicated Resident C utilized side rails. Resident C was observed at that time lying in a low bed with half side rails up on both sides of the bed.</p> <p>The clinical record of Resident C was reviewed on 9/27/11 at 2:45 P.M. Diagnoses included, but were not limited to, Dementia.</p> <p>A Side Rail Assessment, initially dated 3/7/08 and last updated 2/28/11, indicated: "Why is the use of a side rail(s) being considered? Resident requested for: mobility. Medical Symptoms Pain, Cognitive: Impaired safety when walking...Side rail(s) are recommended at</p>						

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	<p>this time due to: Resident request...Recommended Type, 1/2 partial rail Left Upper, Right Upper. Side rail(s) are recommended at all times when resident is in bed...." The most recent notation, dated 2/28/11, indicated, "No changes, continue POC."</p> <p>A Physician's order, initially dated 5/13/11 and on the current September 2011 orders, indicated, "Half Side Rails for bed mobility."</p> <p>A Care Plan, dated 5/13/11, indicated a problem of: "I have a history of falls." The Approaches indicated: "Half siderails up when in bed to assist with bed mobility. Does not prevent rising."</p> <p>A MDS assessment, dated 8/20/11, indicated the resident scored a 1 out of 15 for cognition, with 15 indicating no mental impairment, and required extensive assistance of two+ staff for bed mobility and transfer.</p> <p>During review of the CNA assignment sheets, on 9/27/11 at 11:00 A.M., documentation was lacking that Resident C utilized side rails.</p> <p>6. On 9/27/11 at 8:40 A.M., during the initial tour, LPN # 2 indicated Resident D was up as she desired and did not utilize</p>						

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	<p>side rails. Side rails were observed on each side of the bed; up on one side and down on the other side.</p> <p>The clinical record of Resident D was reviewed on 9/27/11 at 2:30 P.M. Diagnoses included, but were not limited to, General Debility and Alzheimer's Disease.</p> <p>A MDS assessment, dated 7/20/11, indicated the resident scored a 3 out of 15 for cognition, with 15 indicating no mental impairment, and required limited assistance of one person for bed mobility and transfer.</p> <p>A Care Plan, dated 8/5/10 and updated to a target date of 10/23/11, indicated a problem of "Needs assistance to complete bathing, dressing and grooming tasks." The approaches included: "1/2 siderails for bed mobility."</p> <p>A Side Rail Assessment, initially undated but most recently updated 7/23/11, indicated, "Why is the use of a side rail(s) being considered? Resident requested For Bed Mobility...Recommended Type, 1/2 partial rail Left Upper, Right Upper, Recommended Use [left blank]...7/23/11 Uses 1/2 SR to assist [with] bed mobility."</p>						

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	<p>A Physician's order, dated 9/23/11, indicated, "1/2 siderails up to aid in bed mobility."</p> <p>During review of the CNA assignment sheets on 9/27/11 at 11:00 A.M., documentation of the use of siderails was lacking.</p> <p>7. The current facility policy on Side Rails, dated 11-85, was provided by the DON on 9/27/11 at 9:45 A.M. The policy included: "1. A Side Rail Assessment will be completed upon admission, readmission, and as needed. 2. A physician's order and signed Physical Restraint Informed Consent form are required for the use of side rails if they are determined to be a restraint. 3. All beds are supplied with bed rails. 4. When a need for side rails arises, instruct residents as to their purpose and correct use. 5. When side rails are indicated, bed must be kept in the lowest position, except when care is being provided...."</p> <p>This federal tag relates to Complaint IN00097455.</p> <p>3.1-26(o)</p>						

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F0323 SS=F	The facility must ensure that the resident environment remains as free of accident hazards as is possible; and each resident receives adequate supervision and assistance devices to prevent accidents. Based on interview and record review, the facility failed to ensure siderails were assessed for safety following a resident's falls from a low bed with 1/2 rails			F0323	1.) affected by alleged practice:Residents, A,B,C,D, & E now have accurate siderail assissments completed by Nursing Administration which		10/21/2011

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	<p>attached; failed to ensure interventions of a low bed and alarms were documented on the resident's care plan; and failed to ensure an alarm utilized to alert staff of a resident's attempt to rise unassisted was functioning properly, for 1 of 3 residents reviewed for falls, in sample of 5. Resident A. The facility also failed to ensure side rail assessments were complete and accurate in assessing the potential use of side rails; failed to assess for safety issues with the use of siderails; and failed to communicate the use of side rails to all staff, in 2 of 2 units reviewed for side rail use and for 3 of 3 residents reviewed for side rail use in a sample of 3, and 2 of 2 residents reviewed in the supplemental sample of 2. This deficient practice had the potential to affect 82 of 82 residents with siderails attached to their beds. Residents A, B, C, D, and E.</p> <p>Findings include:</p> <p>1. On 9/27/11 at 8:25 A.M., during the initial tour of the Dogwood Unit, Unit Manager # 2 indicated that 6 out of 48 residents who resided on her unit were up ad lib, and did not use siderails. 42 of 48 residents used side rails. The 6 residents who did not utilize siderails continued to have the siderails bolted to the bed, but were kept in the down position. Unit Manager # 2 indicated that all of the side</p>				<p>includes assessment for safety and if indicated to include the use of functioning alarms. Any changes have been communicated to the staff through updated careplans and care guides to reflect accurate information. Unit Managers #1 and #2 and LPN #2 have been educated by the DON on 9/28/11 on the appropriate protocol for siderail usage including obtaining physician orders, and updating careplans and care guides to reflect accurate information. 2.) Potential to be affected: Resident residing in the facility have the potential to be affected therefore a 100% audit will be completed by Nursing Administration by 10/21/11 to ensure all siderail assessments are accurate and include assessments for safety as well as including appropriate alarms if indicated. Any changes will be addressed on the careplan and care guides as well as physician orders will be obtained for safety devices. 3.) Systemic changes: Re-education to Nursing Administration was conducted by the DON on 9/28/11. The re-education included the completion of accurate siderail assessments and safety related to siderails as well as appropriate placement and function of alarms. Re-education with the ICPT was conducted by the Executive Director on 9/30/11 to include the accuracy of careplans and care</p>		

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	<p>rails were the same and that they were considered 1/2 rails. Unit Manager # 2 indicated all of the side rails on her unit were not considered restraints, and that all were used for bed mobility.</p> <p>On 9/27/11 at 8:40 A.M., during the initial tour of the Holly Unit, LPN # 2 indicated that 2 of 34 residents who resided on her unit did not use siderails. 32 of 34 residents used side rails. LPN # 2 indicated all of the rails were 1/2 rails and were used for bed mobility. The 2 residents who did not use siderails were observed to have siderails mounted to the bed, but in the down position. LPN # 2 indicated some residents utilized only a half side rail on one side of the bed; for example if the other side of the bed was against the wall.</p> <p>On 9/27/11 at 9:00 A.M., LPN # 2 provided the current CNA assignment sheets for all of the units. 17 of the 82 residents had mention of siderails being utilized.</p> <p>On 9/27/11 at 9:45 A.M., during interview with the Director of Nursing [DON], she indicated side rails should be removed from the bed if they are not being used. She indicated a facility audit was completed on 9/23/11, in which all resident beds were assessed for the</p>				<p>guides to reflect appropriate siderail and safety alarm interventions. Education also included that a new siderail assessment including assessment for safety and if indicated the need for alarms is to be completed on admission and readmission as well as with quarterly, annual and significant change MDS. Alarms may be assessed as needed at any given time or indication. These siderail and safety assessments are to be completed by Nursing Administration and if indicated as a restraint, therapy will be involved as well. 4.) Method to Monitor:Siderail asesments, safety devices, careplans, and care guides will be audited for accuracy ongoing through the careplan process weekly as scheduled by the ICPT, as well as with any new physician orders at least Monday-Friday. Results of audits will be reported to the PI Committee for 12 months. The PI Committee will determine the need for further audits with threshold at 95%. the plan will be updated as indicated.5.) Completion date October 21, 2011.</p>		

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	<p>distance between the side rails and mattress; and that side rail assessments and care plans were reviewed for appropriateness for use.</p> <p>On 9/27/11 at 11:25 A.M., during interview with Unit Manager # 1, she indicated residents who use side rails should have a physician's order.</p> <p>On 9/27/11 at 3:30 P.M., during interview with Unit Manager # 2, she indicated the use of siderails should be printed on the CNA assignment sheets, and the nurse should sign off on the TAR [treatment administration record].</p> <p>2. The closed clinical record of Resident A was reviewed on 9/27/11 at 9:05 A.M. Diagnoses included, but were not limited to, Dementia and Cerebral Vascular Accident [stroke].</p> <p>An Initial Data Collection Tool/Nursing Service form, dated 3/8/11, indicated, "...Cognitive Status, Alert, Short Term Memory Loss...Bed Mobility, Requires Assistance to Reposition Self...Transfers, 1-2 Person Assistance...Toileting Needs Assistance to Manipulate Clothing and Hygiene Needs...."</p> <p>Nurse's Notes, dated 3/8/11 at 2:00 P.M., indicated: "...Alert to self et [and] family</p>						

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	<p>unable to recall specific day of the week...Unable to recall name of facility. Short term memory loss...Quiet only answers when spoken to...Res [resident] transfers [with] ext [extensive] [assistance] x [two] staff, requires lots of guideness [sic]. Encouraged to [assist] staff in pulling up in bed. Requires [assist] [with] bed mobility...Requires total [assist] [with] ADL's [activities of daily living]...."</p> <p>A Fall Risk Evaluation, dated 3/8/11, indicated: "...Does the resident display any of the following behaviors: easily distracted; periods of altered perception or awareness of surroundings; episodes of disorganized speech; periods of restlessness; periods of lethargy; mental function varies over the course of the day; wanders; abusive and resists care. Yes. Vision Status...Moderately impaired...Elimination with assistance...Ambulates with problems and with devices...Unsteady, but able to rebalance without physical support...."</p> <p>The evaluation indicated the "Total Score" of 21 ["A resident who scores a 10 or higher is at risk...."].</p> <p>A Side Rail Assessment, dated 3/8/11, indicated: "Why is the use of a side rail(s) being considered? Resident requested - For Safety, Other...Cognitive, Requested</p>						

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	<p>rails...Security, Fear of rolling out of bed. Will the side rail(s) assist the resident in: Turning side to side Yes, Moving up and down in bed, Yes...Fluctuations in consciousness No, Decline in cognitive status Yes diagnosis of dementia...Side rail(s) is/are recommended at this time due to: Resident request...Recommended Use, Side rail(s) are recommended at all times when resident is in bed...Resident will be reassessed on/in [left blank] or sooner if there is a significant change in condition. Physician order has been obtained...[left unchecked]. Plan of care updated [left unchecked]."</p> <p>A "Nursing Assessment of Fall," dated 3/27/11 at 4:15 A.M., indicated, "...Trying to go to B/R [bathroom] rolled lower extremities out of bed (low bed) onto the floor had chest et [and] head on bed - holding on to siderails...Possible Causative factors identified: Not ringing for assist to B/R. Care plan changes/instructions...[Left blank]...."</p> <p>A Fall Risk Evaluation, dated 4/16/11, indicated the resident remained at a high risk for falls, with a Total Score of 25.</p> <p>Nurse's Notes included the following notations:</p> <p>5/13/11 at 11:40 P.M.: "Resident noted by</p>						

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	<p>CNA to be laying on stomach in the floor of his room holding on to bed rail [with] Right arm [and] Neck resting on bed rail. Slight redness noted to [left] knee [and] front of neck...."</p> <p>A "Nursing Assessment of Fall," dated 5/13/11, indicated: "...In bed. Tried to get up...Resident noted on stomach holding the side rail [with] [right] hand and neck resting on side rail, the rest of his body was on the floor...Care Plan changes/instructions...[Left blank]...."</p> <p>A new side rail assessment was lacking in the clinical record. Care plan interventions after this fall were lacking in the clinical record.</p> <p>A Fall Risk Evaluation, dated 5/21/11, indicated the resident remained a high risk for falls, with a total score of 21. An additional evaluation, dated 7/5/11, indicated a total score of 26.</p> <p>A Minimum Data Set [MDS] assessment, dated 7/12/11, indicated the resident scored a 12 out of 15 for cognitive status, and required extensive assistance of two+ staff for bed mobility and transfer.</p> <p>The Side Rail Assessment had an addendum, dated 7/15/11, which indicated, "1/2 SR [side rails] in use."</p>						

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	<p>Nurse's Notes, dated 9/23/11 at 4:10 A.M., indicated: "Called to resident room by CNA. Resident on floor with left arm and head positioned between side rail and bed, with chin resting on rail. Resident non-responsive, no pulse or heart rate noted...When this nurse arrived in resident room, bed was in low position, tabs alarm was in place but not sounding, 1/2 side rails up for bed mobility and positioning. EMS unable to revive resident."</p> <p>A Care Plan, initially dated 3/8/11 and updated with a "Goal and Target Date" of 10/20/11, indicated: "Problem Onset:: 03/08/2011 I am at risk for falls." The "Approaches" included: "Keep call light within reach." The Approaches did not include a low bed nor a bed alarm.</p> <p>An additional Care Plan, initially dated 3/8/11 and updated with a goal date of 10/20/11, indicated a problem of "I need help completing my ADL's." The approaches included: "Provide one half siderails to assist me with my bed mobility."</p> <p>Physician orders for the side rails, low bed, nor the alarms for safety were lacking in the clinical record.</p> <p>During interview with the Director of</p>						

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	<p>Nursing [DON] on 9/27/11 at 9:45 A.M., she indicated Resident A had been in a bed in the low position with an alarm in place on 9/23/11. The DON indicated the alarm did not sound because it was a clip type alarm, and it was still connected to the resident. The DON did not know where the alarm box was connected or how long the alarm string was. The DON indicated Resident A utilized his side rails to assist him in turning side to side.</p> <p>During interview with the Unit Manager # 1 on 9/27/11 at 10:30 A.M., she indicated after every fall, the care plan should be adjusted. Unit Manager # 1 indicated Resident A had an air mattress and was in a low bed since he had been admitted to the facility, and she did not know why those interventions were not on the care plan. The Unit Manager indicated she did not know when the intervention of an alarm was added to the care plan.</p> <p>During interview with LPN # 1 on 9/27/11 at 10:45 A.M., she indicated she was the nurse working on 9/23/11. LPN # 1 she had walked past Resident A's bed at approximately 3:50 A.M., and he was resting comfortably. LPN # 1 indicated CNA # 1 had started her "bed check" at approximately 4:10 A.M., and found Resident A lying with his knees on the floor, and his left arm and face between</p>						

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	<p>the side rail and the mattress. LPN # 1 indicated the arm and face were not "wedged", but that the chin was more against the lower inner part of the side rail. LPN # 1 indicated the resident was in a low bed and had an alarm on, but that it did not sound. LPN # 1 indicated the alarm box was at the head of the bed.</p> <p>During interview with CNA # 1 on 9/27/11 at 10:55 A.M., she indicated she was the CNA who found Resident A. She indicated she last saw the resident at approximately 2:25 A.M., and she repositioned him on his right side. CNA # 1 indicated when she went in the resident's room at approximately 4:10 A.M., she found the resident with most of his body on the floor, and his left arm on the bed against the rail. She indicated the resident's chin was resting against the bed rail. She indicated the resident had an alarm on, but that it did not sound.</p> <p>3. 3. On 9/27/11 at 8:25 A.M., during the initial tour, Unit Manager # 2 indicated Resident E was up ad lib, and did not utilize his side rails. Resident E was observed at that time lying in bed, with half side-rails up on both sides of the bed. Unit Manager # 2 indicated that the resident was alert and oriented, and if he wanted to pull them up, he could.</p>						

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	<p>The clinical record of Resident E was reviewed on 9/27/11 at 3:00 P.M. Diagnoses included, but were not limited to, Muscle Weakness.</p> <p>A Physician's order, initially dated on 2/2/11 and on the current September 2011 orders, indicated, "Half upper side rails for increased bed mobility."</p> <p>An "Evaluation for Use of Side Rails," dated 12/22/10 and updated 8/29/11, indicated, "Why is the use of a side rail(s) being considered? Resident requested - For [increased] bed mobility...Recommended Type: 1/2 partial rail Left upper lower Right upper lower, Recommended Use [left blank]...8/29/11 Uses 1/2 SR at night to aid turning side to side."</p> <p>The current CNA assignment sheet, reviewed on 9/27/11 at 11:00 A.M., did not indicate the use of the side rails.</p> <p>4. On 9/27/11 at 8:40 A.M., during the initial tour, LPN # 2 indicated Resident B utilized bed rails. Resident B was observed at that time lying in a low bed, with half side rails up on both sides of the bed.</p> <p>The clinical record of Resident B was reviewed on 9/27/11 at 12:05 P.M.</p>						

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	<p>Diagnoses included, but were not limited to, Dementia and Alzheimer's Disease.</p> <p>A Physician's order, initially dated 1/7/11 and on the current September 2011 orders, indicated, "Low bed placement," and "Half Upper Rails to assist with bed mobility."</p> <p>A Side Rail Assessment, initially dated 6/30/10, indicated, "Why is the use of a side rail(s) being considered? Resident requested: to assist with bed mobility...Recommendations Side rails(s) are recommended at this time due to: Resident request. Recommended Type: 1/2 partial rail Left upper Right upper. Recommended Use, Side rail(s) are recommended at all times when resident is in bed..." The assessment was updated on 9/30/10, 1/7/11, 3/26/11, 4/19/11, 7/11/11, and 9/16/11. The most recent notation, dated 9/16/11, indicated, "No changes, cont POC [plan of care]."</p> <p>A "Nursing Assessment of Fall," dated 6/14/11 at 6:15 P.M., indicated, "...Exact Location: Bedside by bed in resident's room...Possible Causative [sic] factors identified: Confusion...."</p> <p>A Minimum Data Set [MDS] assessment, dated 9/7/11, indicated the resident scored a 4 out of 15 for cognition, with 15</p>						

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	<p>indicating no mental impairment, and required extensive assistance of two + staff for bed mobility.</p> <p>A Care Plan, initially dated 7/10/10 and updated with a target date of 12/15/11, indicated a problem of "[Resident B] is at risk for skin breakdown due to incontinence." The approaches included: "Provide one half siderails to assist with bed mobility."</p> <p>During interview with the DON on 9/27/11 at 3:30 P.M., she indicated that residents were in low beds due to fall risks, and that the side rails were to assist the residents with bed mobility.</p> <p>During review of the CNA assignment sheet, on 9/27/11 at 11:00 A.M., documentation of the use of side rails was lacking.</p> <p>5. On 9/27/11 at 8:40 A.M., during the initial tour, LPN # 2 indicated Resident C utilized side rails. Resident C was observed at that time lying in a low bed with half side rails up on both sides of the bed.</p> <p>The clinical record of Resident C was reviewed on 9/27/11 at 2:45 P.M. Diagnoses included, but were not limited to, Dementia.</p>						

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	<p>A Side Rail Assessment, initially dated 3/7/08 and last updated 2/28/11, indicated: "Why is the use of a side rail(s) being considered? Resident requested for: mobility. Medical Symptoms Pain, Cognitive: Impaired safety when walking...Side rail(s) are recommended at this time due to: Resident request...Recommended Type, 1/2 partial rail Left Upper, Right Upper. Side rail(s) are recommended at all times when resident is in bed...." The most recent notation, dated 2/28/11, indicated, "No changes, continue POC."</p> <p>A Physician's order, initially dated 5/13/11 and on the current September 2011 orders, indicated, "Half Side Rails for bed mobility."</p> <p>A Care Plan, dated 5/13/11, indicated a problem of: "I have a history of falls." The Approaches indicated: "Half siderails up when in bed to assist with bed mobility. Does not prevent rising."</p> <p>A MDS assessment, dated 8/20/11, indicated the resident scored a 1 out of 15 for cognition, with 15 indicating no mental impairment, and required extensive assistance of two+ staff for bed mobility and transfer.</p>						

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	<p>During review of the CNA assignment sheets, on 9/27/11 at 11:00 A.M., documentation was lacking that Resident C utilized side rails.</p> <p>6. On 9/27/11 at 8:40 A.M., during the initial tour, LPN # 2 indicated Resident D was up as she desired and did not utilize side rails. Side rails were observed on each side of the bed; up on one side and down on the other side.</p> <p>The clinical record of Resident D was reviewed on 9/27/11 at 2:30 P.M. Diagnoses included, but were not limited to, General Debility and Alzheimer's Disease.</p> <p>A MDS assessment, dated 7/20/11, indicated the resident scored a 3 out of 15 for cognition, with 15 indicating no mental impairment, and required limited assistance of one person for bed mobility and transfer.</p> <p>A Care Plan, dated 8/5/10 and updated to a target date of 10/23/11, indicated a problem of "Needs assistance to complete bathing, dressing and grooming tasks." The approaches included: "1/2 siderails for bed mobility."</p> <p>A Side Rail Assessment, initially undated but most recently updated 7/23/11,</p>						

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	<p>indicated, "Why is the use of a side rail(s) being considered? Resident requested For Bed Mobility...Recommended Type, 1/2 partial rail Left Upper, Right Upper, Recommended Use [left blank]...7/23/11 Uses 1/2 SR to assist [with] bed mobility."</p> <p>A Physician's order, dated 9/23/11, indicated, "1/2 siderails up to aid in bed mobility."</p> <p>During review of the CNA assignment sheets on 9/27/11 at 11:00 A.M., documentation of the use of siderails was lacking.</p> <p>7. The current facility policy on Side Rails, dated 11-85, was provided by the DON on 9/27/11 at 9:45 A.M. The policy included: "1. A Side Rail Assessment will be completed upon admission, readmission, and as needed. 2. A physician's order and signed Physical Restraint Informed Consent form are required for the use of side rails if they are determined to be a restraint. 3. All beds are supplied with bed rails. 4. When a need for side rails arises, instruct residents as to their purpose and correct use. 5. When side rails are indicated, bed must be kept in the lowest position, except when care is being provided...."</p>						

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	This federal tag relates to Complaint IN00097455. 3.1-45(a)(1)						